

**EXHIBIT “A”**

**EXHIBIT “A”**

**EXHIBIT “A”**

A- 16- 730678- C

## DISTRICT COURT CIVIL COVER SHEET

Clark County, Nevada

XV

Case No. \_\_\_\_\_  
(Assigned by Clerk's Office)**I. Party Information** (provide both home and mailing addresses if different)

Plaintiff(s) (name/address/phone): Stephanie Bryson an individual;	Defendant(s) (name/address/phone): North Vista Hospital, Inc., a corporation; DOES 1-10; AND ROE CORPORATIONS 11-20, inclusive;
Attorney (name/address/phone): Gabroy Law Offices 170 S Green Valley Parkway, Suite 280 Henderson, NV 89012 (702) 259-7777	Attorney (name/address/phone):

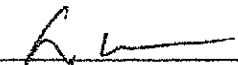
**II. Nature of Controversy** (please select the one most applicable filing type below)**Civil Case Filing Types**

<b>Real Property</b> <b>Landlord/Tenant</b> <input type="checkbox"/> Unlawful Detainer <input type="checkbox"/> Other Landlord/Tenant <b>Title to Property</b> <input type="checkbox"/> Judicial Foreclosure <input type="checkbox"/> Other Title to Property <b>Other Real Property</b> <input type="checkbox"/> Condemnation/Eminent Domain <input type="checkbox"/> Other Real Property	<b>Torts</b> <b>Negligence</b> <input type="checkbox"/> Auto <input type="checkbox"/> Premises Liability <input type="checkbox"/> Other Negligence <b>Malpractice</b> <input type="checkbox"/> Medical/Dental <input type="checkbox"/> Legal <input type="checkbox"/> Accounting <input type="checkbox"/> Other Malpractice	<b>Other Torts</b> <input type="checkbox"/> Product Liability <input type="checkbox"/> Intentional Misconduct <input checked="" type="checkbox"/> Employment Tort <input type="checkbox"/> Insurance Tort <input type="checkbox"/> Other Tort
<b>Probate</b> <b>Probate</b> (select case type and estate value) <input type="checkbox"/> Summary Administration <input type="checkbox"/> General Administration <input type="checkbox"/> Special Administration <input type="checkbox"/> Set Aside <input type="checkbox"/> Trust/Conservatorship <input type="checkbox"/> Other Probate <b>Estate Value</b> <input type="checkbox"/> Over \$200,000 <input type="checkbox"/> Between \$100,000 and \$200,000 <input type="checkbox"/> Under \$100,000 or Unknown <input type="checkbox"/> Under \$2,500	<b>Construction Defect &amp; Contract</b> <b>Construction Defect</b> <input type="checkbox"/> Chapter 40 <input type="checkbox"/> Other Construction Defect <b>Contract Case</b> <input type="checkbox"/> Uniform Commercial Code <input type="checkbox"/> Building and Construction <input type="checkbox"/> Insurance Carrier <input type="checkbox"/> Commercial Instrument <input type="checkbox"/> Collection of Accounts <input type="checkbox"/> Employment Contract <input type="checkbox"/> Other Contract	<b>Judicial Review/Appeal</b> <b>Judicial Review</b> <input type="checkbox"/> Foreclosure Mediation Case <input type="checkbox"/> Petition to Seal Records <input type="checkbox"/> Mental Competency <b>Nevada State Agency Appeal</b> <input type="checkbox"/> Department of Motor Vehicle <input type="checkbox"/> Worker's Compensation <input type="checkbox"/> Other Nevada State Agency <b>Appeal Other</b> <input type="checkbox"/> Appeal from Lower Court <input type="checkbox"/> Other Judicial Review/Appeal
<b>Civil Writ</b> <input type="checkbox"/> Writ of Habeas Corpus <input type="checkbox"/> Writ of Mandamus <input type="checkbox"/> Writ of Quo Warrant <input type="checkbox"/> Writ of Prohibition <input type="checkbox"/> Other Civil Writ	<b>Other Civil Filing</b> <input type="checkbox"/> Compromise of Minor's Claim <input type="checkbox"/> Foreign Judgment <input type="checkbox"/> Other Civil Matters	

Business Court filings should be filed using the Business Court civil coversheet.

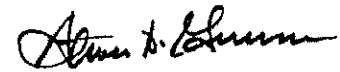
1/22/2016

Date

  
 Signature of initiating party or representative

See other side for family-related case filings.

Electronically Filed  
01/22/2016 11:04:49 AM



CLERK OF THE COURT

**COMP**

GABROY LAW OFFICES  
Christian Gabroy (#8805)  
Ivy Hensel (#13502)  
The District at Green Valley Ranch  
170 South Green Valley Parkway, Suite 280  
Henderson, Nevada 89012  
Tel (702) 259-7777  
Fax (702) 259-7704  
CHRISTIAN@GABROY.COM  
ATTORNEYS FOR PLAINTIFF

**DISTRICT COURT**

**EIGHTH JUDICIAL DISTRICT COURT, CLARK COUNTY NEVADA**

STEPHANIE BRYSON, an individual;

Plaintiff,

vs.

NORTH VISTA HOSPITAL, INC., a  
corporation; DOES 1 through 10; and  
ROE Corporations 11 through 20,  
inclusive,

Defendants.

Case No.: A- 16 - 7 3 0 6 7 8 - C  
Dept.:

XV

**Complaint**

**(Jury Demand)**

**COMPLAINT**

COMES NOW Plaintiff Stephanie Bryson ("Plaintiff" or "Bryson"), by and through her attorneys, Christian Gabroy, Esq. and Ivy Hensel, Esq. of Gabroy Law Offices, and hereby alleges and complains against Defendant North Vista Hospital, Inc. ("Defendant" or "North Vista Hospital") as follows:

**VENUE AND JURISDICTION**

1. This is a civil action for damages under state and federal laws prohibiting unlawful employment actions and to secure the protection of and to redress deprivation of rights under these laws.

GABROY LAW OFFICES  
170 S. Green Valley Pkwy., Suite 280  
Henderson, Nevada 89012  
(702) 259-7777 FAX: (702) 259-7704

2. Jurisdiction and venue is based upon 28 U.S.C. § 2617(a)(2), NRS Chapter 613, *et. seq.*, and Plaintiff's claims under Nevada common law. Further, Plaintiff demands a jury trial on all issues triable by jury herein.

3. All alleged unlawful employment actions occurred in this judicial district.

#### THE PARTIES

4. At the time the relevant events occurred, Plaintiff, at all times relevant, was

(a) an individual residing in this judicial district;

(b) an employee of Defendant as that term is defined in the Family and Medical Leave Act ("FMLA"), 29 U.S.C. § 2611.

5. At all times relevant, Defendant was a foreign corporation organized under the laws of Nevada and was Plaintiff's employer as that term is defined at 29 U.S.C. § 2611.

6. At all times relevant, Defendant had custody and/or control over Plaintiff and her employment and was responsible for Plaintiff's labor and employment matters.

7. DOE DEFENDANTS I-X, inclusive, are persons and ROE DEFENDANTS XI-XX, inclusive, are corporations or business entities (collectively referred to as "DOE/ROE DEFENDANTS"), whose true identities are unknown to Plaintiff at this time. These ROE CORPORATIONS may be parent companies, subsidiary companies, owners, predecessor or successor entities, or business advisors, de facto partners, Plaintiff's employer, or joint venturers of Defendants. Individual DOE DEFENDANTS are persons acting on behalf of or at the direction of any Defendants or who may be officers, employees, or agents of Defendants and/or a ROE CORPORATION or a related business entity. These DOE/ROE Defendants were Plaintiff's employer(s) and are liable for Plaintiff's damages alleged herein for their unlawful employment actions/omissions.

1 Plaintiff will seek leave to amend this Complaint as soon as the true identities of  
2 DOE/ROE DEFENDANTS are revealed to Plaintiff.

3 THE FACTS

4 8. At all times relevant, Plaintiff was employed by Defendant.

5 9. At all times relevant, Plaintiff was an exemplary employee. Plaintiff met  
6 and/or exceeded Defendant's performance expectations.

7 10. On or about January 17, 2014, Plaintiff suffered a work related job injury. As  
8 Plaintiff was pushing a door closed, individuals on the other side of the door pushed in,  
9 causing Plaintiff to fall. As she was falling, Plaintiff hit her knee on the door.

10 11. Plaintiff sought medical care. Plaintiff was diagnosed as having a contusion  
11 of the knee as well as a knee and leg sprain.

12 12. As a result of her work related injury, Plaintiff suffered a compensable work  
13 related injury and sought a worker's compensation claim. See attached C-4 form hereto as  
14 Exhibit I.

15 13. At all relevant times, Plaintiff informed Defendant of her work related injury,  
16 filed her workers compensation claim, and was discriminated against because of her work  
17 related injury and for her pursuit and filing of her workers compensation claim.

18 14. Plaintiff was released to return to work on or about January 20, 2014 with  
19 restrictions of no prolonged standing and/or walking longer than five minutes per hour, no  
20 squatting and/or kneeling, no climbing stairs or ladders, the requirement of wearing a  
21 brace, and sitting 90% percent of the time.

22 15. On or about February 6, 2014, Plaintiff became ill at work.

23 16. On or about the same day of February 6, 2014, Plaintiff sought medical  
24 attention with her primary care doctor during Plaintiff's lunch break at or around 1 P.M.

GABROY LAW OFFICES  
170 S. Green Valley Pkwy., Suite 280  
Henderson, Nevada 89012  
(702) 259-7177 FAX: (702) 259-7704

1           17.     After seeking medical attention from her primary care doctor, because  
2     Plaintiff was diagnosed as febrile, she was admitted into the emergency room at North  
3     Vista Hospital.

4           18.     Plaintiff notified her supervisor, Ms. Mary Jo Russo, an agent of Defendant,  
5     of her arrival to the emergency room.

6           19.     Plaintiff suffered from a serious health condition, cholecystitis.

7           20.     While in the emergency room, Ms. Melissa McCoy ("McCoy"), Director of  
8     Human Resources, visited Plaintiff, informed, and represented to her that she would be  
9     able to take Family Medical Leave Act ("FMLA") leave of absence. McCoy informed and  
10    represented to Plaintiff that she would take care of Plaintiff's FMLA paperwork and that  
11    Plaintiff would be approved for FMLA.  
12

13          21.     Plaintiff, upon reliance of the above, believed and was informed that she was  
14    on an FMLA leave of absence.

15          22.     On or about February 7, 2014, Plaintiff had an endoscopy procedure  
16    completed.  
17

18          23.     On or about February 7, 2014, Defendant provided Plaintiff access to her  
19    work laptop in order to allow Plaintiff to work while she was admitted to the hospital.

20          24.     On or about February 8, 2014, Plaintiff had laparoscopic surgery performed.  
21    Subsequently, Plaintiff was discharged to recover at home.

22          25.     Plaintiff was scheduled for a follow up appointment with her surgeon for a  
23    post-operation assessment on or about February 20, 2014.

24          26.     Plaintiff continued to work on several work projects while at home recovering  
25    from her surgery. In addition, Plaintiff continued to assist staff members with work related  
26    issues via email and text message.  
27

**GABROY LAW OFFICES**

170 S. Green Valley Pkwy., Suite 280  
Henderson, Nevada 89012  
(702) 259-7777 FAX: (702) 259-7704

1           27. On or about February 18, 2014, Plaintiff's supervisor, Melissa McCoy  
2 ("McCoy"), sent Plaintiff a text message asking when she was going to return to work.  
3 Plaintiff informed McCoy that she had not had her post operation assessment and would  
4 update McCoy after she met with her doctor.

5           28. Plaintiff was not released to return to work due to complications.

6           29. On or about February 20, 2014, Plaintiff notified McCoy that she was not  
7 released to return to work due to medical complications. Plaintiff continued to work from  
8 home during such time.  
9

10          30. On or about February 24, 2014, due to complications with her surgery,  
11 Plaintiff was required to get lab work done and an ultrasound completed. Plaintiff continued  
12 to work from home during such time. Plaintiff assisted and responded to work issues.

13          31. On or about February 25, 2014, Defendant wrongfully terminated Plaintiff.  
14 Defendant stated and alleged that it had made several attempts to determine Plaintiff's  
15 intent to continue employment with Defendant. Defendant further falsely alleged that  
16 Plaintiff did not respond to such requests for information and, as a result, was terminating  
17 Plaintiff. See attached letter hereto as Exhibit II.  
18

19          32. On or about February 28, 2014, Plaintiff contacted her supervisor, McCoy, to  
20 inform McCoy that she was working and communicating with Defendant's staff. Plaintiff  
21 provided McCoy emails between Plaintiff and staff to show that she continued to work while  
22 on medical leave.  
23

24          33. On or about the same day of February 28, 2014, Plaintiff's surgeon faxed a  
25 progress report to Defendant, which provided that Plaintiff may not return to work. See  
26 attached patient work release form hereto as Exhibit III.

27          34. On or about March 3, 2014, Plaintiff's supervisor, McCoy, provided that she  
28

1 was informed that Plaintiff was working during Plaintiff's medical leave of absence. See  
2 attached correspondence hereto as Exhibit IV.

3 COUNT I  
4 VIOLATION OF FAMILY MEDICAL LEAVE ACT

5 35. Plaintiff repeats and reasserts the allegations contained in Paragraphs 1  
6 through 34 as if fully incorporated by reference herein.

7 36. Plaintiff, by seeking and believing she took medical leave with the aid of  
8 agents of Defendant because of her serious medical condition, exercised her rights  
9 under FMLA. Employer Defendant committed the aforementioned conduct including  
10 Plaintiff's termination in reckless and willful violation of Plaintiff's federally protected  
11 rights. Defendant's aforementioned conduct including such termination of Plaintiff  
12 resulted in Defendant engaging in activity that chilled the exercise of Plaintiff's rights,  
13 caused interference, caused harassment, retaliated against Plaintiff for exercising her  
14 rights under the FMLA, and/or discriminated against Plaintiff in violation of the FMLA 29  
15 USC § 2615 *et. seq.* Defendant's aforementioned conduct and resulting termination of  
16 Plaintiff was motivated by the exercise of Plaintiff's rights under FMLA and was in  
17 violation of the FMLA.  
18

19 37. Defendant discriminated against and discharged Plaintiff for exercising her  
20 FMLA protected rights. Defendant did not allow Plaintiff to utilize her federally protected  
21 FMLA leave and terminated her while she was on a leave of absence.  
22

23 38. Defendant interfered with, restrained, and/or denied the exercise of or the  
24 attempt to exercise Plaintiff's rights under the FMLA.

25 COUNT II  
26 TORTIOUS DISCHARGE – PUBLIC POLICY TORT  
27 PUBLIC POLICY OF PROTECTING EMPLOYEES WHO PURSUE WORKERS'  
28 COMPENSATION CLAIMS



39. Plaintiff repeats and reasserts the allegations contained in Paragraphs 1 through 38 as if fully incorporated by reference herein.

40. Defendant terminated Plaintiff for reasons that violate Nevada's public policy against terminating employees for pursuing and filing workers' compensation claims. Defendant tortuously terminated Plaintiff for her pursuit and filing of her lawful workers' compensation claim.

41. As a proximate result of Defendant's tortious discharge of Plaintiff, Plaintiff has suffered general, special, and consequential damages in an amount in excess of Ten Thousand Dollars (\$10,000.00).

42. Defendant's acts and/or omissions were fraudulent, malicious, or oppressive under NRS 42.005. Pursuant to NRS 42.005 Plaintiff is entitled to an award of punitive damages in excess of Ten Thousand Dollars (\$10,000.00).

43. As a result of Defendant's conduct, as set forth herein, Plaintiff has been required to retain the services of an attorney, and as a direct, natural, and foreseeable consequence thereof, has been damaged thereby, and is entitled to reasonable attorney's fees and costs.

### COUNT III NEGLIGENT HIRING, TRAINING, & SUPERVISION

44. Plaintiff repeats and reasserts the allegations contained in Paragraphs 1 through 43 as if fully incorporated by reference herein.

45. Defendant had a duty of reasonable care to protect the Plaintiff from the negligent and/or careless actions of their own agents, officers, employees, and others.

46. In addition, Defendant had a duty not to hire individuals with a propensity towards committing unlawful acts against Plaintiff, and to adequately train and supervise their employees in regards to all correct policies and procedures in regards to medical

1 leave, absence, and/or termination policies and procedures.

2 47. In violation of that duty, Defendant damaged Plaintiff by failing to supervise,  
3 train, and hire appropriate personnel which resulted in damages including severe emotional  
4 distress, including but not limited to great mental and emotional harm, anguish, insecurity,  
5 damage to self-esteem and self-worth, shame and humiliation, lack of appetite, loss of  
6 sleep and/or anxiety.

7  
8 **COUNT IV**  
**FRAUD/MISREPRESENTATION**

9 48. Plaintiff repeats and reasserts the allegations contained in Paragraphs 1  
10 through 47 as if fully incorporated by reference herein.

11 49. Defendant falsely represented to Plaintiff that Defendant would process  
12 Plaintiff's FMLA paperwork on her behalf and that Plaintiff was on approved medical leave  
13 of absence. Plaintiff reasonably relied on these representations. Despite these  
14 representations, Defendant did not intend to provide Plaintiff with FMLA leave of absence  
15 or any form of medical leave that would allow her to return to her job.

16 50. Despite knowledge that such representations were false, Defendant willfully  
17 and deceptively failed to disclose to Plaintiff that Plaintiff would be terminated from her  
18 employment as a result.

19 51. The representations were intended to induce Plaintiff to take time off of work  
20 and to believe that she had job security.

21 52. Plaintiff justifiably relied on the representations made by Defendant.

22 53. As direct and proximate result of the misrepresentations of Defendant and  
23 Plaintiff's justifiable reliance thereon, Plaintiff suffered actual, special, and consequential  
24 damages in excess of \$10,000.00.

25 54. The conduct by Defendant, as described herein, was fraudulent, malicious,  
26  
27  
28

1 or oppressive under NRS 42.005, entitling Plaintiff to an award of punitive damages.

2 55. As a further, direct, and proximate result of the conduct of Defendant, Plaintiff  
3 has been compelled to retain attorneys to prosecute this action. Therefore, Plaintiff is  
4 entitled to an award of attorney's fees.

5 WHEREFORE, Plaintiff prays for judgment against Defendant as follows:

- 6 1. For general damages in excess of \$10,000.00;  
7 2. For special damages in excess of \$10,000.00;  
8 3. For consequential damages in excess of \$10,000.00;  
9 4. For punitive damages in excess of \$10,000.00;  
10 5. For liquidated damages in excess of \$10,000.00;  
11 5. For injunctive relief;  
12 6. Such other and further relief as the Court may deem just and  
13 proper.  
14

15 DATED this 22<sup>nd</sup> day of January 2016.

16 GABROY LAW OFFICES

17 By \_\_\_\_\_/s/ Christian Gabroy\_\_\_\_\_  
18

19 GABROY LAW OFFICES  
20 Christian Gabroy (#8805)  
21 Ivy Hensel (#13502)  
22 The District at Green Valley Ranch  
23 170 South Green Valley Parkway,  
24 Suite 280  
25 Henderson, Nevada 89012  
26 Tel (702) 259-7777  
27 Fax (702) 259-7704  
28 ATTORNEYS FOR PLAINTIFF

# Exhibit I

EMPLOYEE'S CLAIM FOR COMPENSATION/REPORT OF INITIAL TREATMENT  
FORM C-4

PLEASE TYPE OR PRINT

## EMPLOYEE'S CLAIM - PROVIDE ALL INFORMATION REQUESTED

First Name		Last Name		Birth Date	Sex	Claim Number (If Superficial Only)	
Home Address		Age	Height	Weight	Social Security Number		
City	State	Zip	Telephone				
Mailing Address		City	State	Zip	Primary Language Spoken		
INSURER		THIRD-PARTY ADMINISTRATOR			Employee's Occupation (Job Title) When Injury or Occupational Disease Occurred		
Employer's Name/Company Name					Telephone		
Office Mail Address (Number and Street)							
Date of Injury (If applicable)	Hours Injury (If applicable)	Date Employer Notified	Last Day of Work After Injury or Occupational Disease	Supervisor to Whom Injury Reported			
Address of Location of Accident (If applicable)							
What were you doing at the time of the accident? (If applicable)							
How did this injury or occupational disease occur? (Be specific and answer in detail. Use additional sheet if necessary.)							
If you believe that you have an occupational disease, when did you first have knowledge of the disability and its relationship to your employment?							
Nature of Injury or Occupational Disease					Part(s) of Body Injured or Affected		
<p>I CERTIFY THAT THE ABOVE IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND THAT I HAVE PROVIDED THIS INFORMATION IN ORDER TO OBTAIN THE BENEFITS OF NEVADA'S INDUSTRIAL INSURANCE AND OCCUPATIONAL DISABILITY ACTS IN ACCORDANCE WITH THE NEVADA INDUSTRIAL INSURANCE ACT. I HEREBY AUTHORIZE ANY PERSON OR PERSONS TO OBTAIN INFORMATION FROM ANY SOURCE, INCLUDING THE NEVADA INDUSTRIAL INSURANCE ACT, TO OBTAIN INFORMATION FROM ANY SOURCE, INCLUDING THE NEVADA INDUSTRIAL INSURANCE ACT, TO OBTAIN INFORMATION FROM ANY SOURCE, INCLUDING THE NEVADA INDUSTRIAL INSURANCE ACT.</p>							
Date							
THIS REPORT MUST BE COMPLETED AND MAILED WITHIN 3 WORKING DAYS OF TREATMENT							
Place							
Date	Diagnosis and Description of Injury or Occupational Disease			Is there evidence that the injured employee was under the influence of alcohol and/or other controlled substance at the time of the accident?			
Hour				If Yes, please explain			
Treatment				Have you advised the patient to remain off work for any reason?			
				If Yes, indicate dates from to			
X-Ray Findings				If modified duty, specify any limitations/restrictions:			
From information given by the employee, together with medical evidence, can you directly connect this injury or occupational disease to the injury?				If Yes, please explain			
Is additional medical care by a physician indicated?				If Yes, please explain			
Do you know of any previous injury or disease contributing to this condition or occupational disease?				If Yes, please explain			
Date	Print Doctor's Name			I certify that the employer's copy of this form was mailed to the employer on:			
Address		City		State		Zip	
City		State		Zip		INSURER'S USE ONLY	
Doctor's Signature		Provider's Tax ID Number		Telephone		Degree	

COPY

Bryson 008

Exhibit II





1409 E. Lake Mead Blvd.  
North Las Vegas, NV 89030  
p: 702.657.5504  
f: 702.657.5535  
www.northvistahospital.com

February 25, 2014

Stephanie Bryson



Dear Stephanie,

You are currently on an unapproved leave of absence. We have made several attempts to find out your intent to continue employment with North Vista Hospital. However, you have not responded to these requests for information. As a result of this non-compliance with our requests, your employment will terminate as of the date of this letter. If you have any personal belongings in your office, please contact me at (702) 657-5771 to make arrangements to pick those up.

Sincerely,

A handwritten signature in cursive script that reads "Melissa McCoy".

Melissa McCoy  
Director of Human Resources

Exhibit III



Patient Work Release

Brian Citro, M.D., P.C. • Stephen Vargo, MD  
8150 N. Tenaya Way Suite 550 • Las Vegas, NV 89128  
(702) 618-0400 • fax (702) 636-0948

Patient Name:

Bryson, Stephanie

The above named patient was seen by me on 2/26/14 to receive medical treatment.

Employee may not return to work at this time. He/She will be re-evaluated on 3.5.14

Employee may return to work on \_\_\_\_\_ with the following restrictions:

☐ Without Restriction

or

☐ Within the following limitations: (limitations to remain in effect until \_\_\_\_\_)

<input type="checkbox"/> SEDENTARY:	Lifting 10 lbs. maximum. Occasionally lifts or carried small items. Some walking and standing may be necessary.
<input type="checkbox"/> LIGHT WORK:	Lifting 20 lbs. maximum. Lifting and carrying up to 10 lbs. Some pushing or pulling acceptable.
<input type="checkbox"/> MEDIUM WORK:	Lift 50 lbs. maximum with frequent lifting and carrying up to 50-70 lbs.
<input type="checkbox"/> HEAVY WORK:	Lift 70-100 lbs maximum with frequent lifting and carrying up to 50-70 lbs.

Stephen Vargo

Stephen Vargo, MD

2.28.14

Date

# Exhibit IV



1409 E. Lake Mead Blvd.  
North Las Vegas, NV 89030  
p: 702.657.5504  
f: 702.657.5636  
www.northvistahospital.com

March 3, 2014

Stephanie Bryson



Dear Stephanie,

During our phone conversation on 2/27/14, you informed me that you had been working during your medical leave. Thank you for bringing this to my attention. Because you were working during the 2/16/14 – 3/1/14 pay period, we will pay you for the entire pay period. In review of your MTO accrual and usage, you accrued 30.75 hours since 1/1/14 and have used 65 hours therefore you are not eligible for an MTO payout.

As previously communicated to you, you are currently on an unapproved leave of absence, therefore, your termination of employment stands. If you have any personal belongings in your office, please contact me at (702) 657-5771 to make arrangements to pick those up.

Sincerely,

A handwritten signature in cursive script that reads "Melissa McCoy".

Melissa McCoy  
Director of Human Resources



**GABROY LAW OFFICES**  
 170 S. Green Valley Pkwy., Suite 280  
 Henderson, Nevada 89012  
 (702) 259-7777 FAX: (702) 259-7704

**IAFD**

Gabroy Law Offices  
 Christian Gabroy (#8805)  
 Ivy Hensel (#13502)  
 The District at Green Valley Ranch  
 170 South Green Valley Parkway, Suite 280  
 Henderson, Nevada 89012  
 Tel (702) 259-7777  
 Fax (702) 943-1936  
 christian@gabroy.com  
 Attorneys for Plaintiff

**DISTRICT COURT**

**EIGHTH JUDICIAL DISTRICT COURT, CLARK COUNTY NEVADA**

STEPHANIE BRYSON, an individual;

Case No.

Dept.

Plaintiff,

vs.

**Initial Appearance Fee Disclosure**

NORTH VISTA HOSPITAL, INC., a  
 corporation; DOES 1 through 10; and  
 ROE Corporations 11 through 20,  
 inclusive,

Defendants.

Pursuant to NRS Chapter 19, filing fees are submitted for parties appearing in the above-captioned action as indicated below:

Stephanie Bryson, Plaintiff \$270.00

TOTAL REMITTED \$270.00

///

///

///

///

1 Dated this 22<sup>nd</sup> day of January 2016.

2  
3  
4  
5 GABROY LAW OFFICES.

6 By:  /s/ Christian Gabroy  
7 Christian Gabroy (#8805)  
8 Ivy Hensel (#13502)  
9 170 South Green Valley Parkway,  
10 Suite 280  
11 Henderson, Nevada 89012  
12 Tel (702) 259-7777  
13 Fax (702) 259-7704  
14 christian@gabroy.com  
15  
16  
17  
18  
19  
20  
21  
22  
23  
24  
25  
26  
27  
28

GABROY LAW OFFICES  
170 S. Green Valley Pkwy., Suite 280  
Henderson, Nevada 89012  
(702) 259-7777 FAX: (702) 259-7704